



PTO/SB/82 (01-06)
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Application Number	10/810,593
Filing Date	03/29/2004
First Named Inventor	Robert M. Palmer
Art Unit	1724
Examiner Name	HRUSKOCI, Peter A.
Attorney Docket Number	A894639US

I hereby revoke all previous powers of attorney given in the above-identified application.

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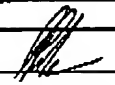
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Robert M. Palmer		
Date	Oct. 10/06	Telephone	403.282.9889

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Application Number	10/R10.593
Filing Date	03/29/2004
First Named Inventor	Robert M. Palmer
Art Unit	1724
Examiner Name	HRUSKOCI, Peter A
Attorney Docket Number	A894639US

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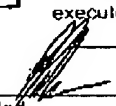
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Signature 

Typed or Printed
Name Robert M. Palmer

Date Oct. 10/06

Telephone 403.282.9889

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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